

An Administrative Model of The Local Health Security Fund In Buriram Province

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Abstract

The objectives of this research were to 1) study the current conditions, factors of success, problems of the local health security fund in Buriram Province, 2) to create and develop an administrative model of the local health security fund in Buriram Province, by using mixed research methods. Divided the research into four phases. The sample of quantitative research consisted of 365 informants from 24 local health security funds, and they were selected via stratified random sampling based on the proportion of the potential funds. The qualitative research was also conducted by using a focus group discussion and participatory observation. The samples were composed of 169 participants from 12 funds. Research instruments were questionnaires and a focus group discussion. Data was analyzed by using frequency, percentage, mean, standard deviation and content analysis. An administration model was created and developed, and the model quality was examined by 12 experts via a panel discussion. The suitability and the possibility of the model was assessed by 30 experts in the research area.

The research results were as follows :

The fund's current conditions investigated by the quantitative research found that the committee opined the operation was overall at a high level ($\bar{x}=3.94$). Moreover, two aspects of building public participation ; and building awareness, understanding, attention towards roles, missions, and performance of the funds were found at a moderate level while other aspects were found at a high level. ($\bar{x}=3.12, 3.50$). For the quantitative research results, the first 5 aspects needed to be urgently developed as the committee prioritized were building public participation and building awareness, understanding, attention towards roles, missions, and performance of the funds, developing the fund committee's potential, controlling and, monitoring, evaluation, and planning, respectively. Having assessed and checked the model quality by the experts, the administrative model of the local health security fund consisted of three components: 1) For the main component, that needed to be urgently developed, consisted of six sub-components. 2) For the secondary components, needed to be

preserved, consisted of four sub-components. 3) For the extra component, needed to be added, consisted of four sub-components. Having assessed suitability and possibility of the model, it showed that suitability of its all components was overall found at a high level ($\bar{x}=4.45$). Possibility of its all components was also overall found at a high level ($\bar{x}=4.08$)

Keywords : Local Health Security Fund, An Administrative Model, Buriram Province

Introduction

The local health security fund is an important innovation in the health care system of Thailand for promoting participation of health care services by many sectors in society. Local Administrative Organization is a key mechanism for coordinating agencies, organizations and network partners in the area to search for problems and needs of people, plan and promote co-operation in health care operation in community and encourage people to play a role in self-reliance in health care as well as promote public health personnel in the area to play a role in supporting people to self-care, together with all involved parties, to promote awareness on the adjustment of people's health behavior and create social mechanism to solve problems affecting their health. This is subject to the provisions of the National Health Security Act 2002. During the establishment of the fund in 2016 to the present, it has been recognized that the performance of the local health security fund has benefited public health and created innovation in many areas (National Health Security Office, 2014 : 19-27) Meanwhile, many researches reflect problems and difficulties of operation and management. Some problems were solved in a better way; however, some problems have remained from the beginning to the present. For example, the participation of public in many areas is at a low level, people lack participation in the election of fund committee. In terms of the committee's potential, it was found that the lack of knowledge and understanding of fund's management and public relations remains consistently (Pattamasirawat Direk, 2007 : 109) People have low participation in the project and lack opportunity of participation for project evaluation (Krongjak Surachet, 2011 : 12) Moreover, there is a lot of balance each year. In overall, in the fiscal year 2015, the balance was 3,600 million baht or 52.25% of the year budget. The funds with moderate potential together with the funds with a lack of readiness and need of urgent development were 23%. In Buriram, the balance of the fiscal year 2015 was almost 71 million baht or 47.54% of the year budget. The funds with moderate potential together with the funds with a lack of

readiness and need urgent development from self-evaluation were 30% and 37.50%, evaluated by district committee (Kittikhun Teerasak, 2013 : 2-3)

f the people. A study found that the potential of the funds affects public health service access of people (Panyarat, 2014). The success of the fund's operation is based on the management and participation from every agency. The researcher conducted this research in order to investigate an appropriate model for developing the operation and administration of the local health security fund to earn efficiency and to meet the purpose of the fund, and solve health problems of local people.

Research Objectives

1. To study current conditions, factors of success, and problems of the local health security fund in Buriram Province.
2. To create and develop an administrative model of the local health security fund in Buriram Province.

Methods

This research with mixed methods was divided into 4 following phases : Phase 1 : A review of related literatures to define the research's framework, topics and questions in order to investigate the fund's current conditions. Phase 2 : An investigation of the current conditions, factors of success, and the problems. The population consisted of 208 local health security funds in Buriram Province in the fiscal year 2015 and 3,141 funds' committees. The samples of quantitative research consisted of 365 informants from 24 local health security funds, and they were selected via stratified random sampling based on the proportional of the potential funds. The qualitative research was also conducted by using a focus group discussion and participatory observation. The samples were composed of 169 participants from 12 funds. Phase3 : A creation and development of a model, the analyzed data were drafted, and the model's quality was checked via a panel discussion by 12 experts. Phase 4 : An assessment of suitability and the possibility of the model by 30 experts in the research area. Research instruments were questionnaires and a focus group discussion. The questionnaires were provided to 5 experts to check the correctness of the language use, content validity and checked for the consistency of the questions and the purpose by using the method of Index of Item Objective Congruence : IOC. The result showed that the IOC was found at 0.2-1.0, which was less than 0.50 based on expert and advisor's suggestions. The questionnaires were presented to the advisor before a test run with 30

informants which were not the sample, and were determined the reliability by using Cronbach's Alpha Coefficient. The reliability was 0.96. The researcher collected the data by herself and her assistants. 335 questionnaires, which was 97.26%, were returned. Data was analyzed by using frequency, percentage, mean, standard deviation and content analysis.

Results

The research results were as follows:

1. The fund's current conditions investigated by the quantitative research found that the committee opined the operation was overall at a high level. Moreover, two aspects of building public participation; and building awareness, understanding, attention towards roles, missions, performance of the funds were found at moderate levels while other aspects were found at high levels. As the researcher wanted to use the data showing the aspects of low operation to create a model, the research results were presented with the aspects of low operation and lower than the overall average. The aspects were as follows : 1) building public participation; 2) building awareness, understanding and attention towards roles, missions, and performance of the fund; 3) developing the fund committee's potential; 4) potential of fund committee; 5) control, monitoring and evaluation; 6) the fund committee's participation. For the quantitative research results, the first 5 aspects needed to be urgently developed as the committee prioritized were building public participation and building awareness, understanding, attention towards roles, missions, and performance of the funds, developing the fund committee's potential, controlling and , monitoring, evaluation, and planning, respectively. Factors of success investigated by using quantitative and qualitative research like 1) leadership characteristics and administrative behaviors of administrators of local administrative organizations, 2) good relationship between the administrators and public health officials of the Primary Care Unit or among the administrators themselves, 3) process to create public participation concretely and continuously, 4) strong teamwork with determination, dedication and positive attitude on public health service, and 5) an effective administrative system. Problems included 1) behavior of the administrators, 2) negative relationship between the administrators and the public health officials, 3) low public participation, and lack of public relation or there are public relations but not overall nor continuous, 4) ineffective administration, 5) control, monitoring and evaluation of the funds with unclear operation

guidelines and a lack of criteria for evaluation, 6) lack of positions of professional personnel of public health in local administrative organizations, 7) lack of knowledge and understanding and low participation of the fund committee, and 8) problems of different financial regulations of the funds and involved agencies, and problems of the project's operation and budget disbursement, and unclear guidelines which made many funds worry about an audit of the Office of the Auditor General of Thailand.

2. The results of the creation and development of the administrative model of the local health security fund in Buriram Province were as follows: the model contained; 1) introduction: rationale, objectives, definition, scope of content; 2) components and content: components, definition of components and details of sub-component; and 3) success conditions and guideline for use. The model contained were 3 components that defined by the urgently development as follows : the main component, that needed to be urgently developed, consisted of 6 sub-components: 1) building public participation, 2) building awareness, understanding and public attention, 3) developing the fund committee's potential, 4) controlling, monitoring and evaluation, 5) planning, 6) the fund committee's participation; For the secondary component, that needed to be preserved, consisted of four: 1) social capital and local wisdom, 2) budget management, 3) organizing, 4) leading and leader ; For the extra component, that needed to be added, consisted of four : 1) development of standard and efficient control, 2) creation of participation between the National Health Security Office and the local health security fund, 3) effective management of conflicts and problems, 4) integration of true cooperation among the National Health Security Office, the Ministry of Public Health and the Ministry of Interior. Having assessed suitability and possibility of the model, it showed that the suitability of all components was overall found at a high level by which the main components were overall found at the highest level while the secondary and extra components were overall found a high level. For its possibility of the use of the model, all components were overall found at a high level by which main and secondary components were overall found at a high level while the extra components were overall found a moderate level.

Discussion

There were some important issues discussed as follows:

1. Having investigate the current conditions of the local health security fund, it showed that the fund committee opined that the aspects with lower operation than other aspects by the quantitative research or the aspects needed to be urgently developed by the qualitative research were the building public participation; and building awareness, understanding, attention towards roles, missions, and performance of the fund. This was because the opportunity of attending the fund activities provided to public was insufficient. For example, the opportunity for public participation in the operation only concentrated on the leaders, or the fund committee or some group of people. Meanwhile, it showed that the distribution of information and the performance of the fund through various kinds of media, including proactive activities in the community such as share & learn, did not cover every area or lacked an operation especially for the funds with a moderate potential level and low readiness level that needed to be urgently developed. People might not realize the benefits they deserved from the fund. The above data reflect that the building public participation of the fund needs urgent develop in order to create true public participation. This is because public participation is the key of development (Sriwilai Wannee, 2008- 94) This research showed that many funds with high and moderate potential level created public participation by allowing people to participate in every process, such as providing information with various channels, getting people's feedback through a satisfaction survey, allowing public to participate in fund's process of operation : an appointment of sub-committees of the fund, including monitoring and evaluation of community projects in each village. So, people can participate in sharing ideas, making decision, operating, receiving benefits and monitoring and evaluating the project. These activities made the operation of the fund successful as a fund model and was consistent with the concept by International Association of Public Participation (IAP2) cited in Kokpol, (Burt Nanus, 1992 : 22) The IAP2 divided the public participation level into 5 stages showing that the higher stage represented decision-making power of public: 1) information, 2) consult, 3) involve, 4) collaborate, and 5) empower stage. At this stage, the public were a decision maker, and this was in line with the concept by (John Cohen and Norman Uphoff, 1980 : 210-218) stating that the principles of public participation must include full participation starting from the beginning to the end as follows : 1) decision making, 2) implementation,

3) benefit engagement, and 4) evaluation; the National Health Security Office stating that there must be a distribution of the fund's information, public relations of the fund and a survey of public satisfaction, and acknowledgement of public information as well as building public participation to the public contribution for the fund ; Kittikhun, T.,³ claiming that the funds with a good level of evaluation had more various channels for public relations and communication than the funds that needed urgent development; Seankosa, R., (Seankosa Rungrueang, 2014 : 49) stating that factors of the fund public relations and public participation directly influenced on the success of fund management; (Pinprateep Wanee, 2007: 183-186) who studied a model of public participation in the health security system, stating that many organizations had sufficient potential to manage the funds by supporting the building public participation allowing public to participate in every management process.

2. The success factors of the operation and management of the local health security fund were found, all of these factors were considered success factors such as the leaders with vision and administrative ability helped creating inspiration as well as planning guidelines and empowering the fund committee by empowering everyone to achieve the goal they involved. This resulted in strong teamwork with determination, dedication and systematic

operation to the goal, which was consistent with (Burt Nanus, 1992 : 16) stating that vision is like a symbol of possibility for an organization with a unique, outstanding, reliable and true goal. The ability of management makes the goal or purpose obvious and operate the process aiming to achieve the goal by teamwork, which is in the line with Rangsiyokrit, S., et al., (Rangsiyokrit Samarn. and Sutthisomboon Sutee, 2006 : 5) including that management was an operation aiming to achieve the goal through various factors such as man, money, things and method of operation; Sriwilai, W. et al., (Sriwilai Wannee, 2008 : 7-9) stating that the key to success was the ability of Sub-district Administrative Organization in collaboration with the public and other agencies to get involved, and factors that brought success were the availability of the team management, vision of the secretary of Sub-district Administrative Organization; Wongkhongkhathep, S. et al., Trisaen, A., (Trisaen Amomrat, 2008 : 3) stating that the success factors of the operation of the local health security fund were a good relationship between the chief of Sub- district Administration Organization and public health officials and participation in community.

3. Problems of the local health security fund this could be explained that the administrators in some areas commented and made decisions on the committee. The committee had less chance to take a role and participate management; in some areas, there were conflicts, between the administrators and the public health officials or among the administrators themselves which affected the operation such as no operation or less operation. Some funds had no assigned officials to be responsible for control, monitoring and evaluation, or there were assigned officials with unclear operational guidelines, but relied on observations when attending the project's opening or project summary; no appointment of a third party to be the committee for evaluating the project.. This made the planning and operation unsuccessful. Lack of understanding and unclear regulations of finance made the operation unsuccessful after the project was approved, resulting in rising balance in each year. Meanwhile, the local administrative organizations with availability of manpower and professional public health officials managed the operation and the fund's management well. For the local administrative organizations without professional public health officials, it was found that many organizations provided good operation, but needed determination and dedication due to routine professional responsibilities. The fund's work could not be evaluated as an advancement of their career. As mentioned above, these problems affecting the operation and management of the fund were in accordance with stating that the chief of the fund played a role in decision making of the fund management and influenced on the success or failure of the fund; Chaisawang, C., stating that the fund lacked public relations and an appointment of the committee to monitor and evaluate the operation of the fund; Surasathainkul, V. stating that the fund's problems were a lack of sufficient potential in effective fund management of the committee and did not provide opportunity for public to participate in monitoring and evaluation of the project

Suggestions

1. The local health security funds should seriously building public participation by providing opportunity for public participation in the process of operation; and should conduct an urgent and strong operation to provide sufficient information for a decision making.

2. The local health security funds should improve potential and participation of the committee by providing trainings or observatory activity focusing on successful funds as well as developing leadership and teamwork.

3 The funds should set the guidelines and criteria for monitoring and evaluating the project including the appointment of the third party monitoring as a committee to strengthen good governance.

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